

# LINKS: *Minority Research & Training*

## NIA Takes Its Training on the Road

The National Institute on Aging (NIA) gives new meaning to “taking the show on the road” with its NIA Director’s Regional Meeting on Aging Research. The annual, one-day meeting travels from state to state offering investigators who are new to aging research and those who are underrepresented in the field the chance to receive hands-on technical assistance in grant writing, personalized feedback and advice about their research abstracts from NIA program officers, and information on other NIA research and training opportunities.

“Most NIA training programs, like our week-long Summer Institute on Aging Research and 2-day Technical Assistance Workshop, require that participants come to us. Our regional meeting is unique because it’s the reverse, we go to them. We have distilled the essence of our longer training into a day-long session for health science professionals and students who have an interest in beginning or strengthening their aging research expertise,” shares NIA’s J Taylor Harden, Ph.D., R.N., F.A.A.N., Assistant to the Director for Special Populations. Harden heads NIA’s Workgroup on Minority Health and Health Disparities, the committee that selects locations for the regional meeting.

The regional meeting concept started in 1993, as part of NIA’s response to the National Institutes of Health’s (NIH) growing interest in increasing diversity in biomedical research. Following a lively conversation about what the Institute could do to support researchers from underrepresented



*NIA Deputy Director Marie A. Bernard, M.D. and Prasad R. Padala, M.D., M.S., at the University of Nebraska Medical Campus*

populations, Richard L. Sprott, Ph.D., former director of NIA’s biomedical research and clinical medicine program, had the ingenious idea, “If we really wanted to do this, I felt that we must go out into the community.” NIA chose Atlanta as the site for the first meeting because they planned to target historically black universities and colleges.

“The Atlanta meeting was sort of a demonstration project--we expected the room to be half-full, instead it was standing room only. We knew that we were on to something. We decided the regional meetings should target all minorities, so we went off to Albuquerque for our second official meeting because of its American-Indian population. We held our third official meeting in Los Angeles, which has a large Latino population,” recalls Sprott.

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## Poverty and Race As Risk Factors for Kidney Disease in African Americans

Poverty may predict chronic kidney disease (CKD) in African Americans but not whites according to a study recently conducted by investigators at the NIA, Johns Hopkins University School of Medicine, and University of California San Francisco (UCSF) and San Francisco General Hospital (SFGH). The research, published in the June 2010 issue of *American Journal of Kidney Diseases*, was one of the first to look at how the relationship between CKD and socioeconomic status (SES) varies by race.

Approximately 20 million people in the United States (or 10 percent of the population over the age of 20) have CKD, a condition in which the kidneys are unable to properly filter blood. CKD can lead to other serious diseases including cardiovascular disease, bone disease, and anemia. It is also a risk factor for death. As CKD progresses, it can cause complete kidney failure, known as End Stage Renal Disease. Low SES and being African American are well-established, independent risk factors for End Stage Renal Disease--African Americans were nearly four times more likely to develop End Stage Renal Disease than whites in 2007.

"The impact of SES and race on a person's risk for earlier stages of CKD was less clear, which is what motivated this investigation," explains Deidra C. Crews, M.D., Sc.M., at Johns Hopkins University School of Medicine in Baltimore, Maryland.

To determine the relationship between SES, race, and CKD, the NIA, Hopkins, and UCSF/SFGH scientists used data collected through NIA's Healthy Aging in Neighborhoods of Diversity across the Life Span (HANDLS) study. The Baltimore, Maryland HANDLS study investigates differences in rates and risks for diseases and other conditions associated with aging among African American and white participants initially between the ages of 30 and 64 and

living in varying socioeconomic communities. For this study, scientists analyzed data on creatinine levels (high levels in the blood are a sign of CKD) and presence of albumin in the urine (another sign of CKD) from 2,375 participants: 1,420 African Americans (713 low SES) and 955 whites (347 low SES). Approximately 6 percent, or 142 participants, had CKD.

Researchers found that race was not independently associated with CKD among study participants. However, similar to national statistics, African American HANDLS participants were more likely to have *advanced stages* of CKD compared to white HANDLS participants. "We found low SES to be associated with CKD, after adjusting for demographics, health insurance status, and co-morbid diseases. Notably, when we stratified these data by race, we found that African Americans living below the poverty line were 33 percent more likely to have CKD than low SES whites. We concluded that poverty may be a stronger predictor of CKD in African Americans than in whites," says Crews.

Researchers are considering several possible explanations for their study findings. For instance, they are identifying ways that poverty may affect African Americans differently than whites that would lead to their increased risk for CKD. Researchers already know that African Americans living in poverty have an increased prevalence of low birth weight, which is a known risk factor for End Stage Renal Disease and perhaps influences risk of CKD. Poverty is also more strongly associated with high blood pressure, unhealthy waist-to-hip ratio, and other "biological risk profiles" for African Americans than for whites. These risk profiles are associated with increased prevalence of CKD. In addition,

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## Come Dance With Me

Some people remember their high school prom as the perfect party to celebrate the end of an era. Others do not fondly recall their evening. For older adults living in or around St. Louis, Missouri, it's never too late to make new prom memories. That's because for the past 3 years students from the Washington University School of Medicine Geriatrics Outreach Group, Washington University School of Medicine's Program in Occupational Therapy, and the St. Louis College of Pharmacy, have worked together to host a special "Senior" Prom.

"The event is an opportunity to increase interaction between health professional students and older adults, to celebrate healthy aging, and to emphasize the importance of socialization and the benefits of physical activity," explains Monique M. Williams, M.D., M.S.C.I., who directs the Community Outreach and Recruitment Core and is Assistant Professor of Medicine and Psychiatry in the Division of Geriatrics and Nutritional Science at Washington University School of Medicine. Williams, an NIA grantee, suggested the concept of a Senior Prom to students in 2007 as a means of outreach and interaction with local older adults. They took the idea and ran with it. This year, 115 older adults from senior apartments and several area community centers attended the Senior Prom. They dined on pasta and dessert. They took prom



2010 Senior Prom; photo credit: Ray Marklin

king and queen photos. They danced to the tunes of the Original Knights of Swing, a 19-piece big band founded in 1949, when the bandleader was in high school. "This is the music that I love. You can understand the lyrics, and the lyrics are pleasant, and it is so enjoyable to dance with the students," one attendee noted.

The magic of the evening, however, is less about the food and entertainment and more about the chance to feel young again. One senior explained how it put a new beat in her husband's step, "My husband had a stroke 18 years ago. We used to go dancing all the time, but he hasn't danced since his stroke. When he heard about Senior Prom, I told him that we should go. He put on his tuxedo, and he danced tonight." For another attendee, the Senior Prom was a like a time machine, transporting her back to a more carefree part of her life, "It was the best event for a person my age to feel so alive and bring back so many precious memories. The room was filled with happiness. Next year, I am going to bring all of my friends!"

A desire to share the positive feeling from this activity makes each prom-goer eager to help spread the word to friends and family, contributing to the event's success. To learn more about the Senior Prom program, contact Williams at [mwilliam@dom.wustl.edu](mailto:mwilliam@dom.wustl.edu).



2010 Senior Prom; photo credit: Ray Marklin



## If it's July, This Must Be the Summer Institute on Aging Research

Each July, a diverse group of early and mid-career scientists fresh to the world of federally-funded research pack their suitcases, temporarily leave their lives behind, and head to Queenstown, Maryland, for the NIA's Summer Institute on Aging Research. There, nestled in the secluded and serene Aspen Wye River grounds, they participate in a week-long, intensive training on what it takes to be a NIA-funded investigator. Over the course of 20 plenary sessions, Summer Institute participants learn from NIA scientists and grantees about NIA's research portfolio, including topics such as designing effective research projects, applying for funding, talking with the media, and addressing challenges related to conducting research with diverse cohorts. Participants also take part in smaller, more intimate breakout sessions where a seasoned scientist leads discussions about research-related issues, responds to questions about being an investigator, and offers advice on ways to thrive in a research career. The plenary and breakout sessions are followed by a mock study section in which participants present and review grant applications from the perspective of a NIA scientist.

Along with learning the ins and outs of NIA's research program, the Summer Institute is an opportunity for participants to reflect on how they would characterize the qualities of a successful investigator and how they imagine their future. Here's what five participants shared:



**Christopher  
Carpenter, M.D.,  
M.Sc.**

*Washington University School  
of Medicine, St. Louis, MO*

Christopher Carpenter,  
M.D., M.Sc., first became

interested in studying and promoting healthy aging while taking a college ethics course where he learned about the hazards of growing old in an increasingly complicated and hectic medical world. "Years later, I personally witnessed medical frustrations and disappointments with my grandparents as one specialist referred them to a different specialist who would then refer them to yet another specialist in the absence of effective physician-to-physician communication. Throughout my medical school and residency training, I repeatedly encountered ageism among my peers and clinical instructors in areas of frailty, functional independence, and therapeutic effectiveness. Ultimately, I gravitated to emergency medicine because I saw a void in the comprehensive care of geriatric adults during acute illness," says Carpenter. Noting that most older adults visit the emergency room at least once in their advanced years, Carpenter is developing an easy-to-implement and effective way to screen older adults for dementia in this setting. He believes it is an ideal place to identify dementia patients who might otherwise go undiagnosed.

In 10 years, Carpenter aspires to be an independent, NIH-funded, investigator and a mentor for emergency physicians interested in aging research. He plans to cultivate what he identifies as the characteristics of a successful investigator: perseverance, ingenuity, efficiency, and a healthy skepticism coupled with a reliable optimism.

Carpenter enjoys spending his free time with his wife and two children. He coaches his children's basketball teams--"they are impressive athletes," he gushes. Carpenter also dreams of becoming the next Stephen King, after a stint as an amateur author of gothic horror fiction in college.

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## Robert Butler, Founding Director of NIA, Dies at Age 83

The aging world lost a passionate and influential advocate when Robert N. Butler, M.D., died of leukemia on July 4 in New York City. He was 83.

For half a century, Butler, a gerontologist and psychiatrist, used his intelligence, persuasiveness, and personal charm to convince legislators, clinicians, and academics that older people could and should have better lives, free of age discrimination and enhanced by effective and available health care.

“Bob Butler was a pioneer who sought to redefine aging, for both individuals and society,” said NIA Director Richard J. Hodes, M.D. “He challenged the status quo, looking at what can be achieved in later life, not at what might be lost. The field of aging research--and anyone seeking a better life with age--has lost a best friend.”

Butler became the NIA's founding director on May 1, 1976. Within days of his arrival, Butler learned he was awarded a Pulitzer Prize for his book, *Why Survive? Being Old in America*. At NIA, Butler set in place a visionary research endeavor, building a rationale and organization for a broad program of basic, biomedical, social, and behavioral research that remains at the core of NIA's efforts today. He stressed preventive medicine as well as individual and family life styles and physical fitness.

As director of NIA, Butler sounded an early warning about the growing number of people with Alzheimer's disease. In 1977, Butler, along with Donald Tower, M.D., Ph.D., then director of today's National Institute of Neurological Disorders and Stroke, organized the first national scientific meeting on Alzheimer's disease at NIH. In 1979, they collaborated with university extramural scientists and private citizens to

create the Alzheimer's Association.

After leaving NIH in 1982, Butler became director of the new Department of Geriatrics at the Mt. Sinai School of Medicine in New York City. He continued his advocacy for older people when he founded the International Longevity Center USA, a nonprofit research, policy, and education center for longevity and aging-related issues with branches in nine other countries.

Butler graduated from Columbia College and received his medical degree from the

Columbia University College of Physicians and Surgeons. After his residency at the University of California, San Francisco, Butler joined the National Institute of Mental Health as a research psychiatrist in 1955. From 1962-76, he held a similar position at the Washington School of Psychiatry. Butler served as a Warrant Officer in the U.S. Maritime Service from 1944-47 and in the U.S. Public Health Service from 1955-62.

Butler held faculty appointments at Howard and George Washington University Schools of Medicine, was a founding fellow of the American Geriatrics Society, helped start the American Association for Geriatric Psychiatry, and was chair of the 1995 White House Conference on Aging.

A prolific writer, Butler's publications include more than 100 articles for professional journals. Three books, *Aging and Mental Health*, *Sex After Sixty*, and *The New Love and Sex After 60* were written with his second wife Myrna Lewis, who died in 2005. *The Longevity Revolution: The Benefits and Challenges of Living a Long Life* was published in 2008.

Butler is survived by three daughters from his first marriage to Diane McLaughlin, one daughter from his marriage to Lewis, and six grandchildren.



Robert Butler, 1927-2010



Summer Institute 2010





*NIA Takes Its Training on the Road (continued from cover)*

States that have hosted regional meetings in recent years include Texas, South Dakota, Kentucky, Georgia, and Louisiana. This year the regional meeting was held at University of Nebraska Medical Center (UNMC) in Omaha, the alma mater of the 2010 regional meeting coordinator and NIA research program analyst, Cerise L. Elliott, Ph.D. “I advocated for the meeting in Nebraska because the area has a large rural aging population, and I felt investigators from Nebraska and nearby states could benefit from learning more about NIA research opportunities,” she says.

But Elliott notes that the regional meeting is a considerable work commitment for the hosting institution. “My former advisor, Dr. M. Patricia Leuschen, worked with her public affairs office to secure a lecture hall space and promote the regional meeting. She extended invitations to the university leadership and NIA sent letters announcing the regional meeting to current NIA investigators from the seven states that border Nebraska.”

The 2010 meeting attracted nearly 80 attendees from Nebraska and surrounding states. The agenda topics included:

- The state of NIA research and how to find your way through the federal maze, presented by NIA Deputy Director, Marie A. Bernard, M.D.
- Overview of NIA’s different areas of extramural research, presented by NIA leaders of the divisions
- Funding options for new investigators, presented by Robin A. Barr, D.Phil., director of NIA’s Division of Extramural Activities
- Minority health and health disparities research at NIA, presented by Harden

- A synopsis of Nebraska’s Aging Research Enterprise, presented by NIA-funded investigators Stephen Bonasera, Ph.D., Asst. Prof. Internal Medicine, Division of Geriatrics, UNMC; and J. Christopher Gallagher, M.D., Prof. Medicine, Creighton University Medical Center, Omaha, Nebraska

The regional meeting also offered the opportunity for an active exchange between participants and NIA leadership. Attendees were asked to submit an abstract of a research proposal in advance of the meeting. These abstracts were reviewed by NIA scientists. During a one-on-one or small group consultation, an NIA scientist was able to provide personalized feedback about the abstract and offer suggestions for next steps.

To learn more about NIA’s regional meeting, including next year’s location and how to volunteer to host a regional meeting, contact Andrea Griffin-Mann at 301-496-0762 or [griffinmanna@nia.nih.gov](mailto:griffinmanna@nia.nih.gov).

*Poverty, Race, and CKD (continued from page 2)*

African Americans may also have different mechanisms for coping with poverty than whites--leading to to unhealthy behaviors. This may influence their risk.

The investigators note that more research is needed to explain their study findings. Ultimately, they hope this research will lead to more effective strategies for preventing CKD, especially among high risk groups.

To learn more about NIA’s HANDLS study, read “HANDLS--Bringing Health Disparity Research to the Neighborhood” in the fall 2009 issue of *Links*, [www.nia.nih.gov/NewsAndEvents/Links/2009Fall.htm](http://www.nia.nih.gov/NewsAndEvents/Links/2009Fall.htm).

## Sanjay K. Juvekar, Ph.D.



*Vadu Rural Health Program, KEM Hospital Research Centre, Pune Maharashtra, India*

Sanjay K. Juvekar, Ph.D., traveled half-way across the world to participate in

the Summer Institute this year. In India, Juvekar studies what older people perceive as their obstacles to maintaining good health and their coping mechanisms for addressing these obstacles.

When asked what typifies a successful investigator, Juvekar suggests three qualities: a wide perspective for understanding the issues, integrity, and an instinct to read and write. “I saw these characteristics in my mentor, Dr. Noshir H. Antia,” he says. Juvekar explains that Antia would take on challenges regardless of whether or not he had specific knowledge or experience in the particular field. “Antia was a plastic surgeon,

performing reconstructive surgery on people with leprosy. But his mark on society was greater than that; he spent more than 40 years dedicated to community health in India,” shares Juvekar. An anthropologist by training, Juvekar chooses to work in a community health setting so that he can approach the health problems facing people in India at the ground level.

Juvekar looks forward to identifying new ways to support older adults to age with health and dignity. He hopes to better understand how older adults define good health and how they apply this perspective to make important health decisions. “I see myself conducting high-quality, community-based health research and formulating solutions to the healthcare challenges facing rural populations world-wide,” he says.

When not hard at work, Juvekar enjoys traveling with his family, especially camping in the jungle. He proudly notes that his 11-year-old daughter is very good at setting up the tent.

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## LET US HEAR FROM YOU!

We asked for updates and you responded. Former Technical Assistance Workshop attendee, Janice F. Moore, Ph.D. C.F.L.E., at Texas Woman's University, reports:

*On Saturday, May 15, 2010, I graduated with a Ph.D. in Family Studies from Texas Woman's University in Denton, Texas. Participation in the 2007 NIA Grants Technical Assistance Workshop for Minority and Emerging Scientists and Students in San Francisco, California, helped me to streamline my dissertation research project, "Caregiving: An Exploration of African American Male Caregiver Roles in Texas." This workshop also afforded me an opportunity to network with other minority students. We continue to contact each other via email. I look forward to participating in upcoming National Institute on Aging programs as I further explore caregiving research. Thanks so much for the technical support.*

We are always interested in hearing from all our program faculty, alumni, and students. Please send us an update and let us know if it can be shared with our readers. We also welcome any feedback about the *Links* newsletter.

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## Sun-Kyeong Lee, Ph.D.



*University of Connecticut  
Health Center,  
Farmington, CT*

Honesty and perseverance--those are the two qualities Sun-Kyeong Lee, Ph.D., says are

required of a successful investigator. "We can learn science and technology," she explains, "but without honesty and perseverance, investigators can only go so far." Her mentor at the University of Connecticut, Nancy Clark, Ph.D., emphasized the importance of these characteristics to Lee. "She told me that I will know more about the subject I'm working on than anyone else in the field and while I should be confident, I cannot be arrogant. She stressed the importance of being honest about my findings, even if they are the opposite of what I expected." Lee remembers this advice when she gets frustrated with her work.

Lee's interest in aging was inspired by her grandfather. Growing up in Korea, she observed her grandfather had a very structured life. He woke up at the same time every day, walked everywhere, ate regularly, never smoked, and rarely drank alcohol, except for homemade wine. Her grandfather lived to be 98 years old--95 of those years were healthy. Lee aspires to live life as fully and to age like him.

Today, Lee studies osteoclasts, cells that break down bone. She is looking at how osteoclasts develop and what systems, hormones, and cells in the body affect this process. Her research may have important clinical applications in the future for people who have osteoporosis (loss of bone from too many osteoclasts) or osteopetrosis (too much bone caused by lack of osteoclasts).

In the next 10 years, Lee wishes to have new projects related to aging as well as more bone-related projects funded by NIH. And,

on a personal note, she looks forward to her son being a college graduate and starting down his own career path.

## Mariana Lopez-Ortega, Ph.D.



*Instituto de Geriatria,  
Institutos Nacionales de  
Salud, Mexico City, Mexico*

For Mariana Lopez-Ortega, Ph.D., dedicating herself to the health needs of older people is not only a career choice

but a personal commitment. "I was raised in a very close-knit family, we have four living generations. Perhaps that is why I have always deeply valued informal caregiving and what it means for older people in terms of physical and psychological wellbeing. While growing up, my parents and grandparents showered me with love and care, and now, at this stage in my life, I have the chance to care for them," she notes.

Lopez-Ortega received her Master's in Public Policy from the University of Chicago in 1997 and her Ph.D. in Public Health and Policy from the London School of Hygiene and Tropical Medicine at the University of London in 2009. She then chose to return home to continue her research career and be closer to her family. Using data from the Mexican Health and Aging Study, Lopez-Ortega is examining how socioeconomic conditions and other factors, over the course of a lifetime, may predict health, frailty, and mortality in later years.

Lopez-Ortega says that the most important trait of a successful researcher is "humanism." "The belief that helping those who are disadvantaged and in need without expecting anything in return is of utmost importance. In research, I believe this translates to having the highest ethical standards, knowing that the individuals we work with come first and their rights and safety should be protected at all times,"

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explains Lopez-Ortega. In a decade she hopes this perspective will help her to become the head of a research department at the Mexican Instituto de Geriatria.

During her free time, Lopez-Ortega and her husband scuba dive every chance they get, “There are few things that have impressed me so much as listening to the hymn of whales in the deep ocean or having mantas swim by me.”

### **Joe Nocera, Ph.D.**



*University of Florida Aging and Rehabilitation Research Center, Gainesville, FL*

When Joe Nocera, Ph.D., thinks about what describes a successful investigator, hard work and dedication are at the top of his list. “Grant funding and publications don’t hurt either,” he adds.

Hard work and dedication are also attributes of successful athletes, so it is not too surprising that Nocera’s research focuses on how physical activity can support older adults’ ability to function and do everyday tasks. In addition, Nocera enjoys watching and participating in sports and doing other fitness-related activities.

When considering where he might be in the next decade, Nocera says, “In 10 years I’d like to think that I am able to design an intervention to improve the lives of older adults through exercise and physical activity. Also, as I become a more experienced investigator, I plan to continue to balance my work and life, spending quality time with my wife and family.”

*To learn about the 2011  
Summer Institute on  
Aging Research  
and how to apply,  
see page 12.*

### **Patricia Caroline Gregory, M.D.**



It is with great sadness that we note the death of former Summer Institute participant, Patricia Caroline Gregory, M.D. She was 45 years old. Gregory

was a wife, mother, active church member, doctor, and medical researcher at the University of North Carolina Neurosciences Department. She was also an NIA grantee and, in 2008, participated in the Summer Institute on Aging Research. Gregory’s STAR (Stroke Telemedicine Access Recovery) Program helped stroke survivors regain their physical function, improve their physical health, and prevent future strokes. She had a special interest in the health needs of underserved populations, in particular the Native American population living in rural North Carolina. Gregory will be remembered for her zest and dedication to the personal and professional parts of her life.



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## Announcing the 2011 Summer Institute on Aging Research Application Deadline: March 4, 2011

Applications are now open to participate in the NIA's 2011 Summer Institute on Aging Research. This 7-day workshop for investigators new to aging research is focused on current issues, research methodologies, and funding opportunities. The 2011 Summer Institute will be held July 9 – 15 in Queenstown, MD. Support is available for travel and living expenses. Applications are due March 4, 2011. Minority investigators are strongly encouraged to apply. Applicants must be U.S. citizens, non-citizen nationals, or permanent residents. For additional information and an application form, contact Andrea Griffin-Mann at 301-496-0762 or [griffinmanna@nia.nih.gov](mailto:griffinmanna@nia.nih.gov).

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